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SECURITY INFORMATION

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COUNTRY	USSR
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REPORT

SUBJECT Soviet Naval Medical Personnel

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1. Commissioned personnel in the Naval Medical Corps fall into the following two basic groups of officers:

- a. Medical assistants (Voyenny Feldsher).
b. Medical doctors (Voyenny Vrach).

2. Medical assistants were graduates of naval medical schools (Voyenno-Morskoye Meditsinskoye Uchilishche) which were located in Leningrad and Vladivostok. Depending on the grades one had received in school, a graduate of one of these schools would be given the rank of either junior lieutenant or lieutenant MG.

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In exceptional cases, when there was a great demand for naval assistants, vacant places were filled with drafted civilian graduates of medical technical schools (Meditsinskiy tekhnikum) and medical assistant's midwife schools (Feldshersko Akusherskaya Shkola), of which there were many in the USSR. Graduates of the latter schools normally were drafted into the navy as sailors; after completing basic training, they would be given a medical assistant's refresher course, promoted to the rank of junior lieutenant MC, and assigned as medical assistants with units or naval medical installations.

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3. Medical assistants MC in the Soviet Navy could be promoted up to and including the rank of senior lieutenant. This was the limit; no medical assistant could ever become a captain MC, since the ranks of captain and above were reserved for medical doctors. However, medical assistants were normally able to advance in spite of this rule, although not in the MC. As soon as a medical assistant, senior lieutenant MC, reached the rank of captain, he would simultaneously be transferred from the medical corps to the naval administrative service where it was possible for one to continue his career unhindered up to the rank of full colonel, usually in a position related to medicine. Quite often such officers, who were actually majors, captains, or lieutenant colonels in the naval administrative service, continued to hold positions and perform duties as medical assistants (even though they did not belong to the MC, did not wear insignia prescribed for MC personnel, and remained in the naval administrative service, wearing insignia prescribed for the personnel of the administrative service.)
4. Time-in-grade requirements for promotion of medical assistants from the rank of junior lieutenant MC to lieutenant MC and for lieutenant MC to senior lieutenant were three years for each advance. Providing that the performance of duty of such officers was satisfactory and their records were clean, they would automatically be promoted to a higher rank after the expiration of the three-year period. Time-in-grade requirements for the further promotion of medical assistants in the naval administrative service was set at a minimum of three years, every promotion to the rank of captain and above being conditional upon a T/O vacancy. There was no legal provision as to the maximum period of service after which a medical assistant could be promoted to the rank of captain, Naval Administrative Service, or higher. It depended entirely upon available T/O vacancies, so that in peacetime captains and majors often remained in their respective ranks for five years or more.
5. The size of the naval unit or installation to which the medical assistants were assigned determined their duties, responsibilities, and rights. The T/O of small naval vessels such as submarines of the "malyutka" type, minesweepers, and torpedo boats, as well as the T/O of naval coastal batteries, could have a medical assistant who was any rank of lieutenant as a chief of medical service.
 - a. A medical assistant who was chief of medical service was responsible for:
 - (1) The physical condition and general health of personnel in his unit.
 - (2) Prophylactic measures to prevent contagious disease and epidemics.
 - (3) Enforcement of sanitary rules and personal hygiene of individuals. The medical assistant had to see to it that every individual in his unit took a shower once weekly (normally on Saturday), changed his underwear, changed his bed linen, and saw to his laundry.
 - (4) Periodic medical checkup of personnel to discover any existing diseases, skin and VD in particular.

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- (5) Issuing, on an obligatory basis, VD prophylactics to personnel returning from liberty. In the Soviet Navy VD was considered a most serious breach of discipline, equivalent to desertion.
 - (6) Constant supervision of and enforcement of sanitary rules in the unit's kitchen, food storeroom, and refrigerator; enforcement of personal hygiene rules for the kitchen personnel; control over the condition of dishes and kitchen utensils. This was one of the most important duties of a medical assistant.
 - (7) Preparation of the daily menu, its adjustment to the prescribed caloric value, and obligatory tests of each prepared meal served personnel.
 - (8) Medical checkup of KP details, especially in respect to cleanliness and possible skin disease.
 - (9) ~~Advancing~~ and instructing the personnel of his unit or installation in sanitation practices.
- b. In the field of treatment of patients, the medical assistant, as chief of medical service, was authorized to do the following:
- (1) Render first aid to personnel injured in accidents.
 - (2) Perform unsupervised daily sick-call.
 - (3) Make diagnosis where no doubt existed as to its correctness.
 - (4) Administer medicaments available in the unit's pharmacy.
 - (5) Give sedatives.
 - (6) Perform most common minor surgical operations under local anesthetics (such as removal of furuncles).
 - (7) ~~Evacuate~~ personnel.
 - (8) Treat light cases of influenza and head colds.
 - (9) Administer fever-fighting drugs.
- c. The authorized scope of activity of a medical assistant in treatment of patients was regulated by the Medical Assistant's Manual (Meditsinskiy Spravochnik Dlya Feldshera), published by the Public Health Ministry in Moscow and adopted by the Soviet Armed Forces. According to the regulations of this manual, a medical assistant working without supervision of a medical doctor was authorized to make diagnosis and to administer medicines where there was no doubt as to the nature of the illness. He was also authorized to give fever-fighting drugs. But all patients with questionable diagnoses, as well as patients with a fever which refused to drop after the fever-fighting drugs had been given, were to be referred immediately to a medical doctor.

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- d. It may be noted that civilian medical assistants, by the nature of their work, sometimes being assigned to rather large regions where there were no medical doctors available, had a much larger scope of activity and responsibility than the medical assistants in the Armed Forces. In many cases, since there was no other way to render medical help to the patient, civilian medical assistants go beyond the limit of activity prescribed by the Medical Assistants Manual. A similar situation existed in the Soviet Navy in wartime. After the war, however, this situation was considerably improved and medical assistants restricted to their normal, authorized duties.
6. On larger naval vessels and naval shore installations where the T/O included a medical doctor as chief of medical service, he usually had one or more feldshers as assistants. In such cases, medical assistants were assigned duties by the doctor which they performed under his immediate supervision. Under such conditions the medical assistant had no direct responsibility except to his immediate superior, who assumed full responsibility for the work performed by his subordinates. On very large vessels and large shore installations where there were several medical assistants, it was customary to divide fields of activity among individual medical assistants working under the direct supervision of a doctor. Normally, in such cases, one medical assistant was made responsible for enforcement of sanitation and health rules among personnel; another for food, the kitchen, and kitchen personnel; and a third for the unit's dispensary.
7. Medical doctors were normally graduates of the Medical Naval Academy, (Voenno-Morskaya Meditsinskaya Akademiya). Especially where there was a need, however, Navy would request some civilian medical doctors. In such cases it was customary to ask for volunteers among students in the last course of civilian medical schools. Student volunteers for the naval medical service were normally sent to the Naval Medical Academy, where they were given one year of special training and afterwards were graduated under the same conditions as regular students of the Naval Medical Academy.
- There were cases where civilian dentists, laboratory personnel, or X-ray specialists were called into the navy without any naval training or refresher course. Such persons were usually given the rank of lieutenant MC.
8. Graduates of the Naval Medical Academy entered the navy with the rank of senior lieutenant MC. (A rather small number of them who had had lower marks in schools were given the rank only of lieutenant MC.) during World War II senior lieutenants MC in the navy had been promoted to captain MC after one year of service.
- However, since the Naval Medical Academy enjoyed an excellent reputation and its graduates were recognized as well-trained medical doctors, it was not irregular for there to be only a one-year service requirement as senior lieutenant for promotion to captain for graduates of this particular school.
- graduates of this school who had entered the navy with the rank of lieutenant were required to serve one year to be promoted to senior lieutenant and one year as senior lieutenant to be promoted to captain.

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9. Naval medical doctors could hold ranks from lieutenant MC up to that of general MC.

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The highest ranking officer in the Soviet Navy Medical Corps was Lieutenant General (Gen Leit) DZHANELIDZE, MC, Chief Naval Surgeon in Moscow. Time-in-grade requirements for promotion of medical doctors in the navy was three years in each grade. Promotion, however, was conditioned by the availability of T/O vacancies.

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several naval doctors who spent their whole service careers in naval shore installations.

- a. Naval medical doctors could serve either on naval vessels or in the naval shore medical installations. The T/O's of naval vessels, starting with destroyers and submarines of the "shchuka" type and up, included slots for medical doctors, chief of the vessels' medical service. In addition to medical doctors, the T/O of a battleship also included a dentist with the rank of lieutenant.
- b. The duties of naval medical doctors were very similar to those performed by doctors in the army. Because of the limited billeting facilities on naval vessels, special emphasis was placed upon enforcement of sanitary rules, prophylactic measures, preventive measures against epidemics, and food control. The naval medical service was very similar both to military and civilian services, but the character of wounds received in naval battles and consequently the general naval experience required of naval medical doctors justified the existence of the Naval Medical Corps and the Naval Medical Academy.
 - (1) The duties of doctors, chiefs of vessels' medical service, were the same as described in paragraph 2c (1) of this report. These duties could be performed either personally or through one or several medical assistants assigned to the same vessel.
 - (2) The duties of naval medical doctors in naval hospitals, sanatoriums, polyclinics, and dispensaries were equivalent to those of the army and civilian doctors in similar positions.

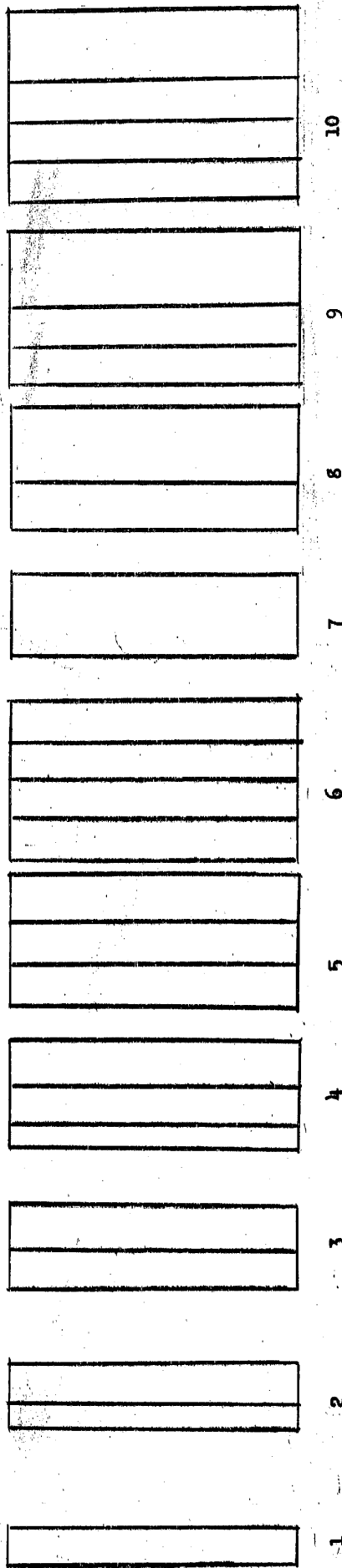
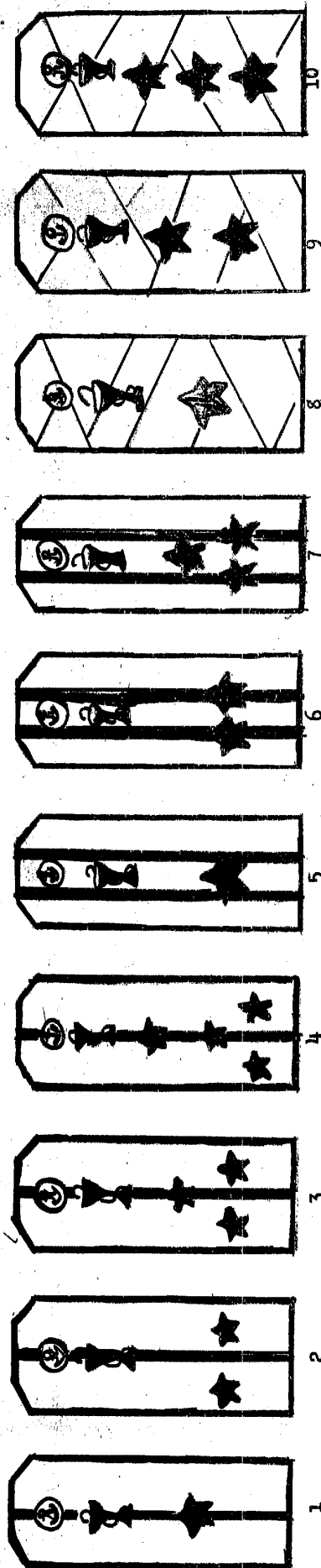
10. All personnel of the Naval Medical Corps wore naval officer's uniforms. The shoulder boards were silver with green stripes and green piping. The stars on the shoulder boards were gold. There was also a medical insignia on the shoulder boards and a naval button. In addition to shoulder boards, the rank of naval medical personnel was indicated on the lower part of the sleeve by silver stripes on a green background. Three different sizes of stripes were used for this purpose: narrow (3/8 in.), medium (3/4 in.), and broad (1 1/4 in.). Naval medical personnel did not wear stars above the stripes on their sleeves as naval line officers did. On their caps naval medical personnel wore "scrambled egg" insignia; field grade officers and general officers had silver embroidery on their cap visors.

11. The pay of naval medical personnel was equivalent to that of army medical personnel. Embarked naval medical doctors or medical assistants received special embarkment allowances according to their rank, just as any other naval personnel.

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Shoulder Boards and Cuff Insignia of Naval Medical Officers



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Legend

1. Junior lieutenant
2. Lieutenant
3. Senior lieutenant
4. Captain
5. Major
6. Lieutenant colonel
7. Colonel
8. Gen. Mayor
9. Gen. Lieutenant
10. Gen. Colonel

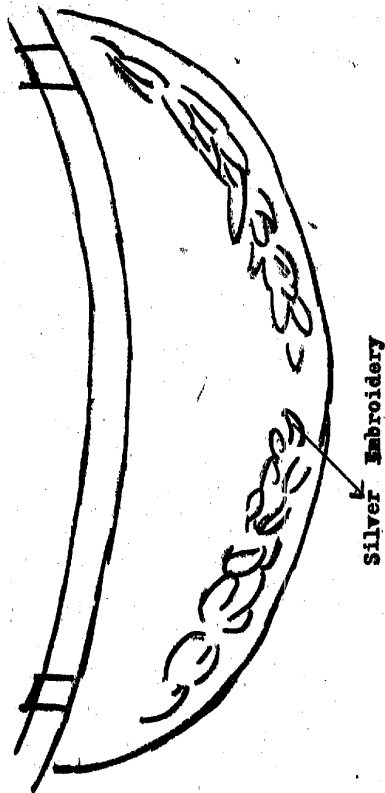
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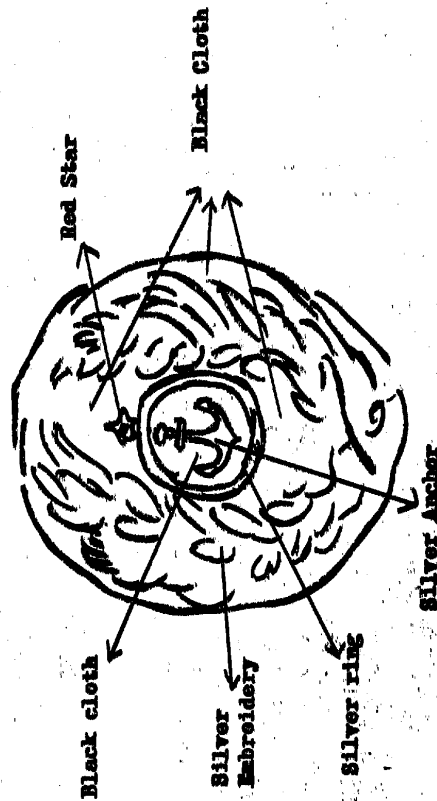
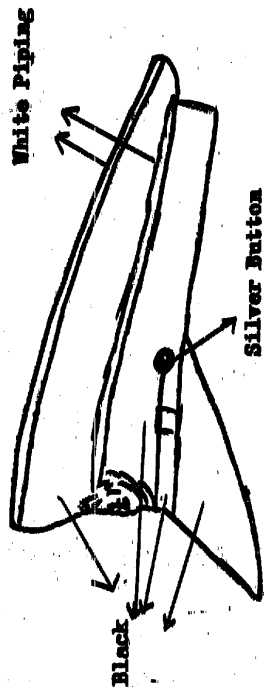
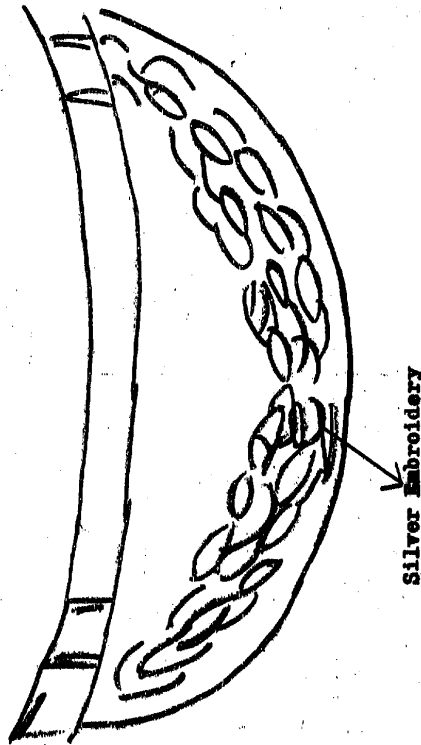
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Cap Insignia of Naval Medical Officers

Cap's Visor
Field Grade
Officers



Cap's Visor
General Officers



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